NOTICE OF FILING/CLAIM FEE(S) DUE

TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: _	08/8/3215
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FORM OIPE-RAM-01 (Rev. 5/97)

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	x	Fœ	Fee =	Total
,	Sm./Lg.				Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101	,				1770	THO
Total Claims >20	203/103	<u>68</u> -20 =	4	X		20	1056
Independent Claims >3	202/102	_5 -3=	2	X		80	160
Mult. Dep Claim Present	204/104						
Surcharge	205/105						130
English Translation	_139						
TOTAL FEE CALCUL	ATION		·				2116
Fees due upon filing th	ne application:					·	
Total Filing Fees Due	=\$	116			.*		
Less Filing Fees Subm	uitted -\$						
BALANCE DUE	= \$			·		·	
Office of Initial Patent	Examination						